

AUG 15 2007

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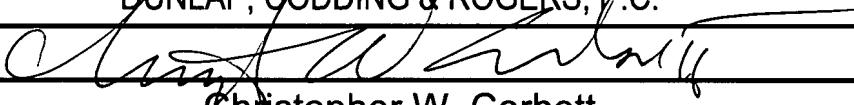
(to be used for all correspondence after initial filing)

	Application Number	10/689,258
	Filing Date	10/20/2003
	First Named Inventor	Daniel E. Resasco, et al.
	Art Unit	1754
	Examiner Name	Stuart L. Hendrickson
Total Number of Pages in This Submission	Attorney Docket Number	5820.640

ENCLOSURES (Check all that apply)

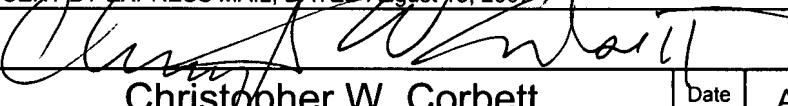
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation of POA, Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): See remarks.
Remarks 1. Transmittal Form (1 page); 2. Fee Transmittal Form (1 page); 3. Patent Application Fee Determination Record (1 page); 4. Credit Card Form (1 page); 5. Amendment and Response (9 pages); 6. Terminal Disclaimer (4 pages); and 7. Pre-addressed postcard.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DUNLAP, CODDING & ROGERS, P.C.		
Signature			
Printed name	Christopher W. Corbett		
Date	August 15, 2007	Reg. No.	36,109

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: *** SENT BY EXPRESS MAIL, DATED August 15, 2007***

Signature			
Typed or printed name	Christopher W. Corbett	Date	August 15, 2007

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)**130.00**

Complete if Known

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Attorney Docket No.	5820.640

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
	- 20 or HP =	0	x	Fee (\$)	Fee (\$)	
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)	Fee (\$)
	- 3 or HP =	0	x			

HP = highest number of total claims paid for, if greater than 20.

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	0 / 50 =		
			= 0	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): **Terminal Disclaimer filing fee** **130.00****SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	36,109	Telephone	405-607-8600
Name (Print/Type)	Christopher W. Corbett			Date	August 15, 2007

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